PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

696615

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)		TY	TYPE		OR	OR SMALLENT		
TOTAL CLAIMS			44					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		ASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			4 4 minus 20=		+ 2 4			X\$ 9=		OR	X\$18=	432.	
INDEPENDENT CLAIMS			minus 3 =		* <u>'</u>	<u>``</u> `` (X43=		OR	X86=	344	
MU	LTIPLE DEPEN	NDENT CLAIM PI	RESĖNT —————					+145=		OR	+290=		
* If	the difference	in column 1 is	less than ze	ss than zero, enter "0" in colum				TOTAL		OR	TOTAL	1546	
CLAIMS AS AMENDED - PART II								•		•	OTHER	THAN	
		(Column 1)	(Column			(Column 3)	_	SMALL E	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	- 0: 111	=		X43=		OR	X86=		
	FIRST PRESE	ENTATION OF MU	JLTIPLE DEF	PENDENI	CLAIM			+145=		OR	+290=		
								TOTAL DIT. FEE			TOTAL ADDIT. FEE		
		(Column 1)	(Column 3)	AU				40011. TEC.					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGH NUME PREVIC PAID I	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	;	X\$ 9=		OR	X\$18=		
\ME	Independent	*	Minus	***		=		X43=		OR	X86=		
<u>'</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						上						
								+145= TOTAL		OR	+290= TOTAL		
								TOTAL DIT. FEE		or,	ADDIT. FEE		
		(Column 1)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=	>	K\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	*** .	=: -: -:	=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									I			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
**	f the "Highest Nun	mber Previously Pa	aid For" IN THIS	S SPACE is	s less thar	n 20, enter "20."	ADE	TOTAL DIT. FEE		OR ,	TOTAL ADDIT. FEE		
	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												